

# Evaluating the effectiveness of acupuncture in defined aspects of stroke recovery.

<b>Submission date</b> 23/01/2004	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 23/01/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 26/01/2010	<b>Condition category</b> Circulatory System	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
SPGS816

## Study information

**Scientific Title**

**Study objectives**

Acupuncture in addition to conventional treatment will have a greater effect on recovery from stroke than intervention by a placebo/control.

Background: Acute stroke counts for 12% of all death in Britain and an expected incidence of 500 per 250000 head of population, 40% of which will be admitted to hospital.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Not provided at time of registration

**Study design**

Randomised controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Cerebrovascular disease

**Interventions**

Both groups will receive rehabilitative care and one of two treatment groups.

1. Acupuncture treatment will consist of dry needling to 3 out of 4 points in the upper limb chosen from; LI4, LI10, SJ5, LI15 with GB20 and 4 out of 5 in the lower limb GB43, BG39, GB34, GB30, ST36. Scalp acupuncture will also be used. The scalp over the motor cortex being stimulated with dry needles to which a direct current of high frequency is applied. Treatment will last 40 minutes and be given 3 times a week for 4 weeks.

2. The control group will receive a mock transcutaneous electrical nerve stimulation (TENS) treatment with adhesive electrodes applied to the same points as in 1. The TENS machine will be adjusted at the output jack so no current flows but it will still retain visual signs of function. Standard physiotherapy will be given to both groups, receiving treatment 5 times a week sometimes twice a day.

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

1. Motricity Index
2. Nottingham Health Profile
3. Standard Barthel Index

**Key secondary outcome(s)**

Not provided at time of registration

**Completion date**

31/12/2001

## Eligibility

**Key inclusion criteria**

Patients who have recently suffered a stroke.

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Other

**Sex**

All

**Key exclusion criteria**

1. History of previous stroke
2. Computed Tomography (CT) scan showing haemorrhage
3. Stroke without limb weakness
4. Unable to co-operate with treatments
5. Initial coma
6. Pacemaker
7. Significant co-morbidity

**Date of first enrolment**

02/01/1997

**Date of final enrolment**

31/12/2001

## Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**

School of Medicine

Southampton

United Kingdom

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# Sponsor information

## Organisation

NHS R&D Regional Programme Register - Department of Health (UK)

## Funder(s)

### Funder type

Government

### Funder Name

NHS Executive South East (UK)

## Results and Publications

### Individual participant data (IPD) sharing plan

#### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/06/2008		Yes	No